

25. Juni 2004

PCT**REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

PCT/EP 2004 / 006916
 International Application No.

25 JUN 2004 (25. 06. 2004)
 International Filing Date

EUROPEAN PATENT OFFICE
PCT INTERNATIONAL APPLICATION
 Name of receiving Office and "PCT International Application"

 Applicant's or agent's file reference
 (if desired) (12 characters maximum) **30928P WO**

Box No. I TITLE OF INVENTION	
Optimized determination of voltage changes using a voltage-sensitive dye	
Box No. II APPLICANT <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Max-Planck-Gesellschaft zur Förderung der Wissenschaften e. V. Hofgartenstr. 8 80539 München Germany	
Telephone No. Facsimile No. Teleprinter No. Applicant's registration No. with the Office	
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) KUHN Bernd Perhamer Str. 7 80687 München Germany	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office	
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) Weickmann & Weickmann P. O. Box 860 820 81635 München Germany	
Telephone No. +49 89 455 63-0 Facsimile No. +49 89 455 63-999 Teleprinter No. Agent's registration No. with the Office	
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)			
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>			
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> DENK Winfried Wilckens Str. 39 69120 Heidelberg Germany		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>	
State (that is, country) of nationality: DE		State (that is, country) of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Applicant's registration No. with the Office		Applicant's registration No. with the Office	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> HÜBENER Gerd Johann-Strauss-Weg 8 81927 München Germany		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>	
State (that is, country) of nationality: DE		State (that is, country) of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Applicant's registration No. with the Office		Applicant's registration No. with the Office	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> FROMHERZ Peter Berchemstr. 97 80696 München Germany		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>	
State (that is, country) of nationality: DE		State (that is, country) of residence: DE	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Applicant's registration No. with the Office		Applicant's registration No. with the Office	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i> 		This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>	
State (that is, country) of nationality: 		State (that is, country) of residence: 	
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Applicant's registration No. with the Office		Applicant's registration No. with the Office	

☐ Further applicants and/or (further) inventors are indicated on another continuation sheet.

Box No. V DESIGNATIONS

The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.

However,

- ☐ DE Germany is **not designated** for any kind of national protection
- ☐ KR Republic of Korea is **not designated** for any kind of national protection
- ☐ RU Russian Federation is **not designated** for any kind of national protection

(The check-boxes above may be used to exclude (irrevocably) the designations concerned in order to avoid the ceasing of the effect, under the national law, of an earlier national application from which priority is claimed. See the Notes to Box No. V as to the consequences of such national law provisions in these and certain other States.)

Box No. VI PRIORITY CLAIM

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office
item (1) (26.06.2003) 26 June 2003	03 014 601.3		EP	
item (2)				
item (3)				

- ☐ Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) *(only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office)* identified above as:

- ☐ all items ☒ item (1) ☐ item (2) ☐ item (3) ☐ other, see Supplemental Box

* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)): . . .

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):

ISA /

Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):

Date (day/month/year)

Number

Country (or regional Office)

Box No. VIII DECLARATIONS

The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):

Number of
declarations

- | | | | |
|--------------------------|--------------------|--|---|
| <input type="checkbox"/> | Box No. VIII (i) | Declaration as to the identity of the inventor | : |
| <input type="checkbox"/> | Box No. VIII (ii) | Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent | : |
| <input type="checkbox"/> | Box No. VIII (iii) | Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | : |
| <input type="checkbox"/> | Box No. VIII (iv) | Declaration of inventorship (only for the purposes of the designation of the United States of America) | : |
| <input type="checkbox"/> | Box No. VIII (v) | Declaration as to non-prejudicial disclosures or exceptions to lack of novelty | : |

Zusatzfeld

Wird dieses Zusatzfeld nicht benutzt, so sollte dieses Blatt dem Antrag nicht beigelegt werden.

1. Wenn der Platz in einem Feld nicht für alle Angaben ausreicht: In diesem Fall schreiben Sie "Fortsetzung von Feld Nr. ..." [Nummer des Feldes angeben] und machen die Angaben entsprechend der in dem Feld, in dem der Platz nicht ausreicht, vorgeschriebenen Art und Weise, insbesondere:

Fortsetzung von Feld Nr. IV:

- (i) Wenn mehr als zwei Anmelder und/oder Erfinder vorhanden sind und kein "Fortsetzungsblatt" zur Verfügung steht: In diesem Fall schreiben Sie "Fortsetzung von Feld Nr. III" und machen für jede weitere Person die in Feld Nr. III vorgeschriebenen Angaben. Der in diesem Feld in der Anschrift angegebene Staat ist der Staat des Sitzes oder Wohnsitzes des Anmelders, sofern nachstehend kein Staat des Sitzes oder Wohnsitzes angegeben ist.

"WEITERE VERTRETER"

Dipl.-Ing.	Franz Albert Weickmann
Dipl.-Chem.	Bernhard Huber
Dr.-Ing.	Horst Liska
Dipl.-Phys. Dr.	Jörg Prechtel
Dipl.-Chem. Dr.	Brigitte Böhm
Dipl.-Chem. Dr.	Wolfgang Weiß
Dipl.-Phys. Dr.	Johannes Tiesmeyer
Dipl.-Phys. Dr.	Markus Herzog
Dipl.-Phys.	Bernhard Ruttensperger
Dipl.-Phys. Dr.-Ing.	Volker Jordan
Dipl.-Chem. Dr.	Michael Dey

- (ii) Wenn in Feld Nr. II oder III die Angabe "die im Zusatzfeld angegebenen Staaten" angekreuzt ist: In diesem Fall schreiben Sie "Fortsetzung von Feld Nr. II", "Fortsetzung von Feld Nr. III" bzw. "Fortsetzung von Feld Nr. II und Nr. III" und geben den Namen des Anmelders oder die Namen der Anmelder an und neben jedem Namen den Staat oder die Staaten (und/oder ggf. ARIPO-, eurasisches, europäisches oder OAPI-Patent), für die die bezeichnete Person Anmelder ist.

- (iii) Wenn der in Feld Nr. II oder III genannte Erfinder oder Erfinder/Anmelder nicht für alle Bestimmungsstaaten oder für die Vereinigten Staaten von Amerika als Erfinder benannt ist: In diesem Fall schreiben Sie "Fortsetzung von Feld Nr. II", "Fortsetzung von Feld Nr. III" bzw. "Fortsetzung von Feld Nr. II und Nr. III" und geben den Namen des Erfinders oder die Namen der Erfinder an und neben jedem Namen den Staat oder die Staaten (und/oder ggf. ARIPO-, eurasisches, europäisches oder OAPI-Patent), für die die bezeichnete Person Erfinder ist.

- (iv) Wenn zusätzlich zu dem Anwalt oder den Anwälten, die in Feld Nr. IV angegeben sind, weitere Anwälte bestellt sind: In diesem Fall schreiben Sie "Fortsetzung von Feld Nr. IV" und machen für jeden weiteren Anwalt die entsprechenden, in Feld Nr. IV vorgeschriebenen Angaben.

- (v) Wenn in Feld Nr. VI die Priorität von mehr als drei früheren Anmeldungen beansprucht wird: In diesem Fall schreiben Sie "Fortsetzung von Feld Nr. VI" und machen für jede weitere frühere Anmeldung die entsprechenden, in Feld Nr. VI vorgeschriebenen Angaben.

2. Wünscht der Anmelder, daß seine internationale Anmeldung in einem Bestimmungsstaat als Anmeldung für ein Zusatzpatent oder -zertifikat, einen Zusatzfinderschein oder ein Zusatzgebrauchszertifikat behandelt wird: In diesem Fall geben Sie den Namen oder Zweibuchstaben-Code des betreffenden Staates an und nach dem Namen des Staates die Bezeichnung "Zusatzpatent", "Zusatzzertifikat", "Zusatzfinderschein" oder "Zusatzgebrauchszertifikat", das Aktenzeichen der Hauptanmeldung oder des Hauptpatents oder eines anderen Hauptschutzrechts sowie das Erteilungsdatum des Hauptpatents oder des anderen Hauptschutzrechts oder das Anmeldedatum der Hauptanmeldung (Regeln 4.11 Absatz a Ziffer iii und 49bis.1 Absatz a oder b).

3. Wünscht der Anmelder, daß seine internationale Anmeldung, in den Vereinigten Staaten von Amerika als Fortsetzung oder Teilfortsetzung einer früheren Anmeldung behandelt wird: In diesem Fall geben Sie "Vereinigte Staaten von Amerika" oder "US" und die Bezeichnung "Fortsetzung" oder "Teilfortsetzung" sowie das Aktenzeichen und das Anmeldedatum der Hauptanmeldung an (Regeln 4.11 Absatz a Ziffer iv und 49bis.1 Absatz d).

Sheet No. 5

Box No. IX CHECK LIST; LANGUAGE OF FILING

This international application contains:		This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):		Number of items
(a) in paper form, the following number of sheets:		1. <input checked="" type="checkbox"/> fee calculation sheet		1
request (including declaration sheets)	5	2. <input type="checkbox"/> original separate power of attorney		
description (excluding sequence listing and/or tables related thereto)	58	3. <input type="checkbox"/> original general power of attorney		
claims	3	4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:		
abstract	1	5. <input type="checkbox"/> statement explaining lack of signature		
drawings	35	6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):		
Sub-total number of sheets	102	7. <input type="checkbox"/> translation of international application into (language):		
sequence listing		8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material		
tables related thereto		9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)		
(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)		
Total number of sheets	102	(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter		
(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column		
(i) <input type="checkbox"/> sequence listing		10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)		
(ii) <input type="checkbox"/> tables related thereto		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)		
(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))		(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)		
(i) <input type="checkbox"/> sequence listing		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column		
(ii) <input type="checkbox"/> tables related thereto		11. <input type="checkbox"/> other (specify):		
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the				
<input type="checkbox"/> sequence listing:				
<input type="checkbox"/> tables related thereto:				
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)				
Figure of the drawings which should accompany the abstract:		Language of filing of the international application: English		

Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).


Dr. Michael Dey

25. Juni 2004

For receiving Office use only		2. Drawings: <input checked="" type="checkbox"/> received: <input type="checkbox"/> not received:
1. Date of actual receipt of the purported international application:	25 JUN 2004 (25. 06. 2004)	
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:		
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA /	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	

For International Bureau use only

Date of receipt of the record copy by the International Bureau: